

GOVERNMENT OF GUAM DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES DIVISION OF ENVIRONMENTAL HEALTH			BARBER AND BEAUTY SHOPS, SCHOOLS, AND THE PRACTICE OF BARBERING AND COSMETOLOGY INSPECTION REPORT	
INSPECTION	GRADE	Inspection Date	ESTABLISHMENT NAME:	
Regular <input checked="" type="checkbox"/>	8/A	01/03/17	ENTIRE NOUS SALON	
Follow-Up <input type="checkbox"/>		Time In/Out:	OWNER/OPERATOR:	
Complaint <input type="checkbox"/>		12:50/2:00	SHIN, SKYE	
Investigation <input type="checkbox"/>		Sanitary Permit:	LOCATION: LOT 5134-1-8 # 801 PALE SAN VITORES RD, TUMON	
Other(Specify Below)		No.: 160003046 Exp.: 06/30/17	ESTABLISHMENT TYPE: BARBER / BEAUTY SHOP	
The following items identify violations found this day in the operations and facilities which must be corrected by the next inspection, or sooner as the Department indicates. Non-compliance may result in downgrading or permit suspension. To appeal, a written hearing request must be submitted before the indicated correction date.				
ITEM NO.*	REMARKS			DEMERITS
	A REGULAR INSPECTION WAS CONDUCTED TODAY AND THE FOLLOWING VIOLATIONS WERE OBSERVED:			
08	COMMON USE SPONGES FOUND IN SOME WORK STATIONS. COMMON USE SPONGES SHALL BE PROHIBITED TO PREVENT SPREAD OF DISEASE. CORRECTIVE ACTION: SAID SPONGES WERE DISCARDED.			COS
12	SEVERAL JARS OF CREAMS FOUND WITH FINGER MARKS. SPATULA OR SPOONS AND OTHER SUITABLE UTENSIL SHALL BE USED TO DISPENSE CREAMS OR OTHER SEMI-SOLID PRODUCTS TO PREVENT CONTAMINATION			4
38	STAINED CEILING TILES FOUND EVERYWHERE IN THE FACILITY CEILING SHALL BE KEPT CLEAN AND IN GOOD REPAIR TO PREVENT HARBORAGE OF PESTS SUCH AS MOLD.			4
19	MEASURING CUPS NOT USED TO PROPERLY DILUTE THE DISINFECTANT SOLUTION. STANDARD MEASURING CUPS SHALL BE USED TO ENSURE THAT SANITIZING SOLUTION ADEQ IS PROPERLY DILUTED. CORRECTIVE ACTION: PIC INSTRUCTED HOW TO FOLLOW LABEL AND USE MEASURING CUPS. PICTURES OF VIOLATIONS WERE TAKEN. ISSUED "A" PLACARD NO. 01819. DISCUSSED THIS REPORT WITH OWNER, SKYE SHIN.			COS
I HAVE READ AND UNDERSTAND THE ABOVE VIOLATION(S) AND I AM AWARE OF THE CORRECTIVE MEASURES TO BE TAKEN				
*When any of the following items are cited above, they shall be corrected within ten (10) days of this inspection: (1), (2), (3), (7), (8), (17), (22), (24), (31), (43), and (45).		RECEIVED BY (Name & Title): DEH INSPECTOR (Name & Title): LELANI NAYANAO, EPHO I		
GEH-07 Rev: 10/98		WHITE COPY - Office YELLOW COPY - Establishment		

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